



APPLICATION FOR ADMISSION

Thank you for applying to Lake Tahoe Community College. Please complete each section of the application and sign the certification on the last page.

Admission/Registration Information

In which class are you enrolling through South Bay Regional Public Safety Training Consortium (The Academy)?

Social Security Number	Student ID (former LTCC students)	Date of Birth	Gender ☐ Male ☐ Female
Last Name	First Name	Middle Name	
Legal/Permanent Address (Do not Use P.O. Box)			
Street	City, State, Zip		County
Mailing Address			
☐ Check box if same as legal/permanent address			
Street or P.O. Box	City, State, Zip		County
Other Contact Information			
Primary Phone	Other Phone	Email Address	
Emergency Contact Name		Emergency Contact Phone	Relationship

Citizenship and Ethnicity

Citizenship (check only one) ☐ U.S. Citizen ☐ Permanent Resident ☐ Temporary Resident ☐ Refugee/Asylee ☐ Student Visa (F-1 or M-1) ☐ Other Visa – specify type: _____ ☐ Other Status	INS Number (if permanent or temporary resident)	
	Date of Issue	Expiration Date
	Country of Citizenship (if not U.S. Citizen)	Country of Birth (if not U.S. Citizen)
Ethnicity (Mark All That Apply)		
☐ Asian: Cambodian ☐ Asian: Chinese ☐ Asian: Japanese ☐ Asian: Korean ☐ Asian: Laotian ☐ Asian: Vietnamese ☐ Asian: Other	☐ Central American ☐ Mexican, Chicano, or Mexican-American ☐ South American ☐ Hispanic: Other	☐ Filipino ☐ Pacific Islander: Guamanian ☐ Pacific Islander: Hawaiian ☐ Pacific Islander: Samoan ☐ Pacific Islander: Other ☐ African-American Non-Hispanic ☐ American Indian ☐ Alaskan Native ☐ White Non-Hispanic ☐ Other Non-White ☐ Unknown or Decline to State

Military Information

Military status: ☐ Currently active military ☐ Dependent spouse or child of currently active military ☐ Currently in Reserves ☐ Currently in National Guard ☐ Discharged within the last year (veteran) ☐ Discharged over a year ago (veteran) ☐ None apply to me – skip remainder of military status questions	Military State of Legal Residence :
Date of Discharge (if applicable)	Home of Record:
	Are you currently stationed in California? ☐ Yes ☐ No

Foster Care Status

- ☐ I have never been in foster care.
☐ I am currently in foster care in California.
☐ I was previously in foster care in California and aged out or was emancipated from the system.
☐ I am currently in foster care in a system outside of California.
☐ I was previously in foster care in a system outside of California and aged out or was emancipated from the system.
☐ I was previously in foster care, but did not age out or emancipate from the system.

Special Programs

Are you primarily applying to enroll in one of these programs:

- ☐ Inmate Education – El Dorado County
☐ International Ed./International Student
☐ Intensive Spanish Summer Institute (ISSI)
☒ South Bay Regional Public Safety Training (The Academy)
☐ Tahoe Parents Nursery School

Education

Educational Goal (mark one):

- ☐ Transfer to a 4-year college with an associate degree
☐ Transfer to a 4-year college without an associate degree
☐ Obtain a community college academic degree
☐ Obtain a community college vocational degree
☐ Earn a vocational certificate without transfer
☐ Discover/formulate career interests and goals
☐ Prepare for a new career (acquire job skills)
☐ Advance in current job/career (update job skills)
☐ Maintain certificate/license (e.g., real estate)
☐ Educational development (intellectual, cultural, physical)
☐ Improve basic skills in English, reading, or math
☐ Complete credits for high school diploma or GED
☐ To move from noncredit to credit coursework
☐ 4-year college student taking classes to meet 4-year requirements
☐ Undecided on goal

Enrollment Status (mark one):

- ☐ New – first time enrolled at any college
☐ Transfer – attended another college previously
☐ Other – current/former LTCC student or other status

Education Level (mark highest level completed):

- ☐ Not a high school graduate and not enrolled in high school
☐ Currently attending K-12 school
☐ Currently enrolled in Adult School
☐ Received high school diploma
☐ Passed the GED or received a High School Certificate of Equivalency or Completion
☐ Received a Certificate of California High School Proficiency
☐ Received Foreign Secondary School Diploma/Certificate of Graduation
☐ College graduate – received Associate Degree
☐ College graduate – received Bachelors Degree or higher

High Schools Attended

Name of High School	City, State	From	To
Name of High School	City, State	From	To

Colleges and Universities Attended

Name of College or University	City, State	From	To
Name of College or University	City, State	From	To
Name of College or University	City, State	From	To

If you are primarily a student at another college or university, which of these have you completed at your home institution:

- ☐ Orientation
☐ Assessment or Placement Tests
☐ Academic Advising

Parents' Education Level (First Generation)

Father:

- ☐ High school diploma or GED
☐ Some college, no degree
☐ Associate degree
☐ Bachelor's degree
☐ Master's degree or higher
☐ Other /Unknown

Mother:

- ☐ High school diploma or GED
☐ Some college, no degree
☐ Associate degree
☐ Bachelor's degree
☐ Master's degree or higher
☐ Other /Unknown

Academic Program/Major (Mark Only One)

Associate Degrees

- ☐ Addiction Studies
- ☐ Anthropology
- ☐ Art
- ☐ Business – Accounting
- ☐ Business – Finance
- ☐ Business – Management
- ☐ Business – Marketing
- ☐ Business – General Business
- ☐ Business – Global Business
- ☐ Business – Small Business Ownership
- ☐ Business Administration – Transfer Degree
- ☐ Computer and Information Sciences - Web Development
- ☐ Criminal Justice
- ☐ Administration of Justice – Transfer Degree
- ☐ Culinary Arts
- ☐ Early Childhood Education
- ☐ Early Childhood Education – Transfer Degree
- ☐ English
- ☐ Firefighting & Emergency Operations
- ☐ Fire Officer
- ☐ Geology – Transfer Degree
- ☐ Humanities
- ☐ Liberal Arts – Arts & Humanities
- ☐ Liberal Arts – Math & Science
- ☐ Liberal Arts – Social Sciences
- ☐ Mathematics – Transfer Degree
- ☐ Medical Office Assistant – Administrative
- ☐ Medical Office Assistant – Clinical
- ☐ Natural Science
- ☐ Physical Education & Health – Exercise Science
- ☐ Physical Education & Health – Health
- ☐ Psychology – Transfer Degree
- ☐ Social Science
- ☐ Sociology - Transfer Degree
- ☐ Spanish
- ☐ Visual & Performing Arts – Art
- ☐ Visual & Performing Arts – General
- ☐ Visual & Performing Arts – Music
- ☐ Visual & Performing Arts – Theatre Arts
- ☐ Wilderness Education – Climbing Skills
- ☐ Wilderness Education – Snow Skills
- ☐ Wilderness Education – Water Skills

Certificates of Achievement

- ☐ Addiction Studies
- ☐ Art
- ☐ Business – Accounting Technician
- ☐ Business – Small Business Ownership
- ☐ Computer Applications
- ☐ Computer & Information Sciences - Web Development
- ☐ Criminal & Administration of Justice
- ☐ Culinary Arts – Foundations of Baking & Pastry Arts
- ☐ Culinary Arts – Foundations of Cooking
- ☐ Culinary Arts – Global Cuisine
- ☐ Culinary Arts – Vegetarian Cuisine
- ☐ Culinary Arts – Wine Studies
- ☐ Early Childhood Education
- ☐ English as a Second Language – Noncredit
- ☐ Firefighting & Emergency Operations
- ☐ Fire Officer
- ☐ Firefighter I
- ☐ Medical Office Assistant – Administrative
- ☐ Medical Office Assistant – Clinical
- ☐ Photography
- ☐ Spanish
- ☐ Wilderness Education – Climbing Skills
- ☐ Wilderness Education – Snow Skills
- ☐ Wilderness Education – Water Skills

Other

- ☐ Undeclared
- ☐ Non-Credit Certificate of Completion: ESL Proficiency
- ☐ Other major not listed

Residency Information

If you currently live in California, when did your current stay begin?

If you currently live in Nevada, when did your current stay begin?

Have you done any of the following in a state other than California in the last two years?

- | | | |
|--|------------------------------|-----------------------------|
| • Obtained a driver's license? | ☐ Yes | ☐ No |
| • Registered to vote? | ☐ Yes | ☐ No |
| • Filed state income tax? | ☐ Yes | ☐ No |
| • Petitioned for divorce? | ☐ Yes | ☐ No |
| • Attended college or another educational institution as a resident of that state? | ☐ Yes | ☐ No |

→ If you have lived at your current address for less than two years, please list the other addresses where you lived during that period.

Street	City, State, Zip	From	To
Street	City, State, Zip	From	To
Street	City, State, Zip	From	To



SKIP TO NEXT SECTION IF YOU ARE AGE 19 OR OVER

Supplemental Residency Information – Complete Only If Under Age 19			
Have you ever been married? ☐ Yes ☐ No			
With whom do you currently reside? ☐ Both parents ☐ Mother only ☐ Father only ☐ Legal guardian(s) ☐ Other – answer next question			
If you marked “Other”, please answer the following questions: - Are you under continuous and direct care of any person(s) other than your parents? ☐ No ☐ Yes – since _____ - With which of your parents did you last reside? ☐ Both parents ☐ Mother only ☐ Father only - Are your parents deceased? ☐ No ☐ Yes, both parents ☐ Yes, mother only ☐ Yes, father only			
Answer the following questions about the parent/guardian with whom you lived most recently:			State
- Does your parent/guardian have a driver’s license or state issued ID card? ☐ Yes ☐ No - Did your parent/guardian file state income tax? ☐ Yes ☐ No - Is your parent/guardian registered to vote? ☐ Yes ☐ No 			
What is your parent/guardian’s citizenship status? ☐ U.S. Citizen ☐ Permanent Resident ☐ Temporary Resident ☐ Refugee/Asylee ☐ Student Visa (F-1 or M-1) ☐ Other Visa – specify type: _____ ☐ Other Status			
INS Number (if permanent or temporary resident)			
Date of Issue			Expiration Date
→ Please list your parent or legal guardian’s addresses for the last two years.			
Street	City, State, Zip	From	To
Street	City, State, Zip	From	To

Initial Point of Contact		
Where did you first hear about LTCC?		
☐ South Bay Regional Public Safety Training Consortium ☐ Employer ☐ High school counselor ☐ College or university counselor	☐ College fair ☐ LTCC Schedule of Classes ☐ Newspaper/Magazine ads ☐ Radio ads ☐ Billboard or sign	☐ Web site/Internet search ☐ Social Media ☐ Other (please specify): _____

CERTIFICATION – TO BE READ AND SIGNED BY APPLICANT:

I declare under penalty of perjury that all information on this form is correct. I understand that falsification, withholding information, or failure to report a change in residence may result in my dismissal.

Student signature: _____ **Date:** _____

Office Use Only	ID# _____
☐ CAR ☐ OSR ☐ FCR ☐ AB540 ☐ GNP	